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City of San Antonio CITY OF SAN ANTONIO DEPT. OF PLANNING OFFICE OF DIRECTOR

New

JUN 17 AM 11: 40

Vested Rights Permit **APPLICATION**

Permit File: #03-06-017	
Assigned by city staff	

Date: 4-29-03

- 1. All applicable information on application must be legibly printed or typed for processing. If application is completed on behalf of the property owner please attach power of attorney or letter of agent.
- 2. Please complete this application and attach 2 maps of the property and 2 sets of all supporting documents.

	Note: All Applications must have a Site Map showing the Area Boundary (Attached).			
	Franciscan Sisters of Chicago vner/Agent: Service Corporation Phone: 708-647-6500 Fax: 708-647-6982 1055 W. 175th Street, Suite 202 dress: Homewood, Il Zip code: 60430			
En	gineer/Surveyor: Overby Descamps Engineers Phone: 828-3520 Fax: 828-3599			
Ad	dress: 11815 Warfield, San Antonio, Texas Zip code: 78216			
1.	Name of Project:			
2.	Site location or address of Project: 8103 North Hollow			
	San Antonio, Texas			
3.	Council District 8 ETJ Over Edward's Aquifer Recharge? () yes (X) no			
4.	What is the specific purpose of this Project and the expected use(s) to be created by this Project (type of development, number of buildings, type of building(s), specific use(s) of those buildings, etc.)? Please be aware that the city must understand exactly what this Project is expected to accomplish in order to evaluate this application. Construct a new continuing care senior retirement community center consisting of 114 independent apartments, and 36 assisted living, Type "B" licensed apartments. The center will also have administrative offices, kitchen/cantina a chapel, entertainment rooms, a library, and a wellness center.			
5. 6.	What is the date the applicant claims rights vested for this Project? April 13, 1994			

The Contractor has cleared minimal underbrush.

Pe	rinit file #	
		ecify all that
Data	of Applications	
PMENT PLAN (MDP) (For are subject to permit right conditions to	rmerly POADP)* within 18 months from the eff	fective date of the 3 months for the
Expiration Date:	MDP Size:	acres
	#	
		•
Plat #	Acreage	•
Expiration Date:		
vithin 18 months of application	ı submittal date).	
vision Unit 1A Plat# 9400	001 Acreage: 7.693	Approval
g Date: <u>3-3-97</u> Expiration	Date:Vol./Pg.	9536/140
rithin 3 years of plat approval p	ermit rights will expire).
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	<u>le as a state jail felony l</u>	y up to two
<u>10,000.</u>		
		rect and that it is
YER Signature:	M	_Date: 28 May
	Date issued:	Date of Application:

	Permit File # 03-04-011
	1. Anglemeyer on this 38xl day of ertify which witness my hand and seal of office.
JUNE M. GORNY NOTARY PUBLIC, STATE OF INDIANA	Notary Public, State of Indiana
ST. JOSEPH COUNTY My Commission Expires Jan. 4, 2009	
City of Sa	an Antonio use
Permit File: #Assigned by city staff Approved Approved	April 13, My Date:
Approved Approved	o Disapproved
Review By://///	Date: 7-7-03
Assistant City Attorney	
•	
Comments:	·
;	



11815 WARFIELD

SAN ANTONIO, TEXAS 78216

TEL: (210) 828-3520 FAX: (210) 828-3599

TRANSMITTAL

ATTN.: Planning Department VIA: Courier TOTAL PAGES: FOR YOUR: ACTION REQUIRED: CONTENTS: PRIORITY: RECORDS SIGNATURE PRINTS URGENT REVIEW RECOMMENDATION NOTES IMMEDIATE COMMENT APPROVAL PLATS EARLIEST CONVENIE ADVISEMENT REVISION CONTRACTS NORMAL PLATS EARLIEST CONVENIE ADVISEMENT REVISION CONTRACTS NORMAL EYES ONLY RETURN OTHER/BELOW PER YOUR REQUEST OTHER/BELOW PER YOUR REQUEST OTHER/BELOW Vested Rights Permit Application with the Agent Authorization Letter - Original Vested Rights Permit Application with the Agent Authorization Letter - Copies	
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1 Vested Rights Permit Application with the Agent Authorization Letter - Original	NCE
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OFFICE OF DIN 17	<u> </u>
DISTRIBUTION: BY: Lara Schoenenberger, E.I.T.	

550 South Union Street

Mishawaka, Indiana 46544

ST. JOSEPH CAPITAL BANK MISHAWAKA, IN 46545

030264 71<u>-1405</u> 712

рите June 13, 2003

DOLLARS \$160.00

PAY***ONE HUNDRED SIXTY DOLLARS 00/100***

TO THE ORDER OF

City of San Antonio

1.8501.1202.1.192.0E0#